

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2010 070926

2010 DEC -1 PM 1:38

MICHAEL J. HAN
RECORDER

Recording requested by: Bob
When recorded, mail to:
Name: M+M Construction Inc
Address: P.O. Box 489
City: Knox
State/Zip: Indiana 46534

Space above reserved for use by Recorder's Office

Document prepared by:
Name BOB BIOWIN
Address P.O. Box 489
City/State/Zip Knox, IN 46534

Claim of Lien

State of Indiana
County of Starke

I, M+M Construction Inc., being duly sworn, state the following:
In accordance with an agreement to provide labor and/or material, I did furnish the following labor and/or materials: Windows: 2-2 LS + 10 DH's complete install.

on the following described real property located in Lake County,
State of Indiana, commonly known as:

6838 Parrish Ave Hammond, IN 46320

and legally described as:

Hartmans' Gardens 2nd Add. N2 L10 BLS

which property is owned by Christopher R. Holmes, whose address is
6838 Parrish Ave. Hammond, IN 46320, of a total value of \$ 7,088.⁰⁰,
of which there remains unpaid \$ *1,088.⁰⁰, and I further state that I furnished the first of
the items on the date of March 8th 2010, and the last of the items on the date of
March 10, 2010.

I hereby, under the laws of the State of Indiana, claim a lien against the
above-described property in the amount of money, stated above, which remains unpaid to me.

ISW
CS
R4?

[Signature]
Signature of Person Claiming Lien

Bob Blouin % M+M Construction Inc.
Name of Person Claiming Lien

Address of person claiming lien: P.O. Box 489 Knox, IN 46534

On November 30, 2010, Robert Blouin came before me personally and, under oath, stated that he/she is the person described in the above document and that he/she signed the above document in my presence.

[Signature]
Notary Signature

Notary Public,

In and for the County of Starke State of Indiana

My commission expires: 9-28-2014 Seal

CERTIFICATE OF MAILING

I, Bob Blouin, certify that on this date, _____, I have mailed a copy of this Claim of Lien by USPS certified mail, return receipt requested, in accordance with the law, to:

Name: Christopher R. Holmes

Address: 6838 Parrish Ave. Hammond, IN 46320

Date: _____

I AFFIRM, UNDER THE PENALTIES FOR PERJURY, THAT I HAVE TAKEN REASONABLE STEPS TO REDACT EACH SOCIAL SECURITY NUMBER IN THIS DOCUMENT, UNLESS REQUIRED BY LAW."
PREPARED BY: [Signature]

Signature of Person Mailing Claim of Lien

Name of Person Mailing Claim of Lien

California residents or persons intending that this document be valid in the State of California should use the following California Notary Acknowledgment form:

State of California

County of _____ } S.S.

On _____, before me, _____

(name and title of notary), personally appeared _____, who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the above instrument and acknowledged to me that they/he/she executed the instrument in their/his/her authorized capacity. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct. Witness my hand and official seal.

Seal

Notary Signature